

240 Department of Health

(in Millions of Kina)

PIP No.	Project Title	5 Year Total	2009	2010	2011	2012	2013
1801	THS III	8.7	2.2	2.0	2.0	1.5	1.0
2255	PDF	.8	.2	.2	.2	.2	.1
2460	CBSCP	126.6	31.6	30.0	25.0	20.0	20.0
2480	RWSSP	44.3	9.3	9.5	9.5	8.0	8.0
2486	HSIP	44.1	12.1	11.0	9.0	7.0	5.0
2499	HSRF	91.2	21.2	20.0	20.0	15.0	15.0
2686	MEDEQUIP	20.0	6.0	5.0	4.0	3.0	2.0
2757	HPRHS	86.1	18.1	18.0	18.0	16.0	16.0
2758	SCSP	17.5	4.5	4.0	4.0	3.0	2.0
2759	WTSHS	12.0	3.0	3.0	3.0	2.0	1.0
2760	TSTZHP	3.6	1.0	.8	.7	.6	.5
2761	ONZS	4.0	1.1	1.0	.8	.6	.5
2762	LMHC	2.9	.7	.7	.6	.5	.4
2867	RHP	14.8	2.8	4.0	4.0	2.0	2.0
2901	SMESP	3.9	.9	.9	.8	.7	.6
2908	SMESP	4.2	1.2	.9	.8	.7	.6
2910	DTWS	39.5	9.5	9.0	8.0	7.0	6.0
2912	CMT	8.0	2.0	2.0	2.0	1.0	1.0
2914	HAM	6.6	1.9	2.0	1.0	.9	.8
2918	NZHAI	7.3	1.8	2.0	1.5	1.0	1.0
2928	SHP	.9	.2	.2	.2	.2	.1
TOTAL CAPITAL PROJECTS		547.0	131.3	126.2	115.1	90.9	83.6
TOTAL		547.0	131.3	126.2	115.1	90.9	83.6

240 Department of Health

AGENCY SUMMARY OF ALL PROJECTS

EXPENDITURE PROJECTIONS AND FINANCING REQUIREMENTS (K Millions)

PROJECT COST		2007 Actual	2008	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Current Transfers								
	Goods and Other Services		131.1	418.1	100.2	96.8	86.7	70.0	64.4
	Sub-Total		131.1	418.1	100.2	96.8	86.7	70.0	64.4
	Capital Expenditure								
	Capital Transfers								
	Acquisition of Existing Assets								
	Capital Formation		26.7	128.9	31.1	29.4	28.4	20.8	19.2
	Sub-Total		26.7	128.9	31.1	29.4	28.4	20.8	19.2
A	TOT DIRECT PROJECT COST		157.8	547.0	131.3	126.2	115.1	90.8	83.6
	Technical Assistance								
	Equipment								
	Project Preparation								
	Advisory								
	Training								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)		157.8	547.0	131.3	126.2	115.1	90.8	83.6
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	Loan								
	Grant		135.8	507.9	120.3	116.2	107.1	84.8	79.6
	b) Self Generating Revenue								
	a) Government Input		22.0	39.0	11.0	10.0	8.0	6.0	4.0
C	TOTAL DIRECT FINANCING		157.8	546.9	131.3	126.2	115.1	90.8	83.6
D	Technical Assistance								
	TOTAL FINANCING (C+D)		157.8	546.9	131.3	126.2	115.1	90.8	83.6
FINANCING SOUGHT									
	Direct Project Cost (A-C)			.1					
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT			.1					

PIP NUMBER: 1801

PROJECT NAME: TERTIARY HEALTH SERVICES PHASE III

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To provide specialist medical and/or surgical treatment to those who cannot afford to travel outside PNG for urgent attention and to provide PNG doctors with specialised operation techniques and lectures.

PROJECT STATUS:

The project normally operates from Port Moresby General Hospital however, it has extended to the Autonomous Region of Bougainville. The project has provided specialist medical and surgical treatments in major selected hospitals in the country. It has also provided training to local doctors and health workers to acquire specialist skills that are not available in Papua New Guinea.

PROJECT COMPONENTS:

The project components include lecture and training for PNG doctors to learn specialist skills not available in Papua New Guinea.

PROJECT LOCATION:

This project provides specialist medical and surgical treatment in major selected hospitals. Most of these activities are carried out at PMGH. The project has also extended to Bougainville in the North Solomons Province.

PROJECT JUSTIFICATION:

This project enables national doctors and other health workers to upgrade or acquire specialist skills that is most needed in parts of PNG. It also provides training in the use of specialist equipment. These doctors and health workers may then in turn provide the same services within the country.

PROJECT CAPACITY:

PNG has doctors with specialist skills but lack the appropriate equipment to perform their duties. The visiting doctors normally come to PNG with specialist equipment and provide training to local doctors who later use the equipment for specialist treatment.

PROJECT BENEFICIARIES:

Many disadvantaged people in the country who need specialist medical attention. The project also provides on-the-job training to local doctors.

PROJECT SUSTAINABILITY

The project continues to train our national doctors to perform specialist operations. Continuity of this service is possible as doctors become more specialized in their respective areas. In order to sustain this project, the government needs the specialist surgical equipment, machinery and the technology to perform the tasks required which is catered for under the Purchase of Medical Equipment Program. The National Department of Health has the capacity to sustain the project activities.

1801 TERTIARY HEALTH SERVICES PHASE III

ESTIMATED TOTAL PROJECT COST 2,111.2 ESTIMATED DURATION OF THE PROJECT 1.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services								
	Current Transfers								
	Sub-Total								
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
	Capital Transfers								
	Sub-Total		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
A	TOT DIRECT PROJECT COST		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
	Loan								
	Grant		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
	TOTAL DIRECT FINANCING		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
C	Technical Assistance								
D	TOTAL FINANCING (C+D)		2,461.8	8,676.5	2,176.5	2,000.0	2,000.0	1,500.0	1,000.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

This project is funded by the Australian Government (AusAID).

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022019203 TERTIARY HEALTH SERVICES PHASE II

PIP NUMBER: 2255

PROJECT NAME: HEALTH PROGRAM DEVELOPMENT FUND

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To provide direct, immediate and sustainable development impacts to the health sector in PNG that are consistent with the National Health Plan. The funds will also help increase the involvement of private and public Papua New Guinean organisations in the implementation of AusAID funded health programs.

PROJECT STATUS:

A funding mechanism to support efforts of the NDOH to develop an effective health care system in PNG. Trust instruments were signed and trust accounts were opened and were fully operational in 2000. The program provides funding on a flexible basis to cover costs associated with the development of the Health Sector Program. It also includes such costs as travel and allowances for PNG officials and AusAID officers or advisors relating to sector discussions, and support for small, discrete sector planning activities.

PROJECT COMPONENTS:

1) Proposal Development and Appraisal 2) Secretariat Support to the Management Group 3) Mobilisation, Monitoring and Evaluation of Projects 4) Coordination and Review of the Initiatives Funds.

PROJECT LOCATION:

The funds will be used to help implement health activities throughout Papua New Guinea. It will support the administrative, operative and travel related costs to the Health Department personnel.

PROJECT JUSTIFICATION:

The Health Program Development Fund is not a stand alone project. It is a funding mechanism to support the functions of the NDoH.

PROJECT CAPACITY:

The Health Department has the capacity to use the funds efficiently in its activities.

PROJECT BENEFICIARIES:

The funds will initially benefit the Health Department and all other organisations it deals with in implementing its activities.

PROJECT SUSTAINABILITY

The Health Department will take this initiative on board for recurrent financing once AusAID funding ceases.

2255 HEALTH PROGRAM DEVELOPMENT FUND

ESTIMATED TOTAL PROJECT COST 474.0 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services								
	Current Transfers								
	Sub-Total								
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation		246.1	817.6	217.6	200.0	150.0	150.0	100.0
	Capital Transfers								
	Sub-Total		246.1	817.6	217.6	200.0	150.0	150.0	100.0
A	TOT DIRECT PROJECT COST		246.1	817.6	217.6	200.0	150.0	150.0	100.0
	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)		246.1	817.6	217.6	200.0	150.0	150.0	100.0
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
	Loan								
	Grant		246.1	817.6	217.6	200.0	150.0	150.0	100.0
C	TOTAL DIRECT FINANCING		246.1	817.6	217.6	200.0	150.0	150.0	100.0
D	Technical Assistance								
	TOTAL FINANCING (C+D)		246.1	817.6	217.6	200.0	150.0	150.0	100.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

The Australian Government fully funds this program.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022011202 PROGRAM DEVELOPMENT FUND

PIP NUMBER: 2460

PROJECT NAME: CAPACITY BUILDING SERVICE CENTRE PROJECT

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

The main objective of the project is to facilitate and manage all AusAID technical assistance to the health sector. It is to build the capacity in the health sector in PNG and through the project it is expected that health advisors will be placed in key health positions across the country.

PROJECT STATUS:

The Capacity Building Service Centre tendering and bidding process was undertaken in 2004 and the main program implemented under this initiative commenced in August 2005 and is expected to end in 2010. Due to critical staffing shortages in key areas of NDoH (such as Disease Control, Human Resources, Finance and Budget and HSIP Management Branch), and an inability by NDoH to recruit to these positions, AusAID have agreed to short-term funding of in-line positions through CBSC. Support for approximately 27 positions commenced in August 2006 and finished in March 2008.

PROJECT COMPONENTS:

This project has one component which is Capacity Building through training.

PROJECT LOCATION:

This project is based in Port Moresby at the National Department of Health (NDOH).

PROJECT JUSTIFICATION:

As all AusAID projects wind down to fully participate in the HSIP to implement Sector wide Approach, there will be a need for continuous provision of TAs to the Health Sector to assist in the implementation of the SWAP. Therefore, AusAID needs fully qualified Advisors to continue assisting NDOH to implement projects through HSIP.

PROJECT CAPACITY:

AusAID has the capacity to implement the project with the support from Department of Health to manage Health Sector Improvement Program (HSIP) and CBSC.

PROJECT BENEFICIARIES:

The National Department of Health will benefit very much from this CBSC where our National Consultants should be able to gain valuable experience and training through full participation in the CBSC.

PROJECT SUSTAINABILITY

AusAID will continue to sustain and ensure smooth progress of the CBSC to achieve better outcomes and results.

2460 CAPACITY BUILDING SERVICE CENTRE PROJECT

ESTIMATED TOTAL PROJECT COST 31,607.6 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
Current Transfers									
Sub-Total			35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST		35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)			35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
C	TOTAL DIRECT FINANCING		35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
Technical Assistance									
D	TOTAL FINANCING (C+D)		35,696.7	126,558.6	31,558.6	30,000.0	25,000.0	20,000.0	20,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

AusAID is fully funding the project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022011205 CAPACITY BUILDING SERVICE CENTRE PROJECT

PIP NUMBER: 2480

PROJECT NAME: RURAL WATER SUPPLY & SANITATION PROGRAMME

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

The objectives of the programme include: (1) To provide safe water supply & sanitation in rural enclaves (2) To assist village community in promotion of the environment health and (3) To monitor the physical, social, and mental well being of the people in communities and to promote and encourage the maintenance of currative and preventive medical and related health services.

PROJECT STATUS:

This is an ongoing project initiated by European Union, which commence in January 2006 and will end in 2012. Selected provinces have been assisted with water projects in rural areas and have trained people on how to manage and maintain the water project. Awareness and training on environmental health and preventive medical and related health services is benefiting the people. Morobe Province is advancing ahead of other provinces as it was the first province to be targetted.

PROJECT COMPONENTS:

There are two components in the programme: (1) Rural Water Supply & Sanitation Programme, (2) Rural education & Training through the HRD Programme.

PROJECT LOCATION:

This project will be implemented in areas where LLG services are inadequate , as well as to promote training of individuals and village level workers in water management, system operations and maintenance.

PROJECT CAPACITY:

The National Department of Health as the executing agency should have the capacity to implement and coordinate the programme.

PROJECT BENEFICIARIES:

The main beneficiaries of the project will be the rural population, in particular the LLGS, villages and communities.

PROJECT SUSTAINABILITY

The National Department of Health should be able to sustain the program.

2480 RURAL WATER SUPPLY & SANITATION PROGRAMME

ESTIMATED TOTAL PROJECT COST 14,500.0 ESTIMATED DURATION OF THE PROJECT 6.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
Current Transfers									
Sub-Total			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A TOT DIRECT PROJECT COST			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
C TOTAL DIRECT FINANCING			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
D Technical Assistance									
TOTAL FINANCING (C+D)			33,200.0	44,283.6	9,283.6	9,500.0	9,500.0	8,000.0	8,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

This program is funded by European Union.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022016203 WATER SUPPLY & SANITATION PROGRAMME

PIP NUMBER: 2486

PROJECT NAME: HEALTH SECTOR IMPROVEMENT PROGRAMME

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

The program sets in place a Sector-wide Approach (SWAp) framework to handle resources from development partners and the government so that Government is allowed to allocate resources to priority areas in health.

PROJECT STATUS:

The programme was initiated in 2003 by Government of Papua New Guinea and development partners, and the initial phase of implementation began in 2005. The core function of HSIP is to manage and provide funding to upgrade the health facilities as well as renovations and maintenance work conducted at all districts and rural health centres. The health facilities including renovations, maintenance work, conducting trainings and construction and completion of STI clinics were in place since the inception of the programme in 2005. Furthermore, health services are delivered to the rural majority as well as to improve living standards through health awareness.

PROJECT COMPONENTS:

The main program components are; 1) Review of the organisational structures of all delivery systems procurement of essential drugs; 2) Capacity building to ensure effective delivery of health services; 3) The partnership policy with the private sector NGOs, or external sources; 4) Develop a Health Promotion Policy for the development of research-based and cost effective information dissemination and health promotion; and (6). Conduct audits on provinces that do not have their books in order.

PROJECT LOCATION:

The Health Services Improvement Programme is executed by the Dept. of Health management by its Health Services Project Management Unit. The program will be implemented throughout the country.

PROJECT JUSTIFICATION:

The HSIP is a new approach in the health sector. All the individual development projects are winding down paving way for the new SWAP, where HSIP will eventually see the main mode of project delivery. It will source and mobilise resources and fund priority activities.

PROJECT CAPACITY:

The National Department of Health has the capacity to effectively oversee implementation of the programme with the assistance from the the Capacity Building Service Centre Project which will continue to provide technical assistance to the sector.

PROJECT BENEFICIARIES:

The major beneficiaries include NDOH and the Provinces as well as the general population of PNG.

2486 HEALTH SECTOR IMPROVEMENT PROGRAMME

ESTIMATED TOTAL PROJECT COST 101,360.0 ESTIMATED DURATION OF THE PROJECT 6.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
Current Transfers									
Sub-Total			18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST		18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)			18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input			10,000.0	19,000.0	5,000.0	5,000.0	4,000.0	3,000.0	2,000.0
b) Self Generating Revenue									
Loan									
Grant			8,712.7	25,126.9	7,126.9	6,000.0	5,000.0	4,000.0	3,000.0
C	TOTAL DIRECT FINANCING		18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
Technical Assistance									
D	TOTAL FINANCING (C+D)		18,712.7	44,126.9	12,126.9	11,000.0	9,000.0	7,000.0	5,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

NZAID is co-funding this programme.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022011206 HEALTH SERVICES IMPROVEMENT PROGRAMME (HS)

PIP NUMBER: 2499

PROJECT NAME: HEALTH SECTOR RESOURCING FRAMEWORK

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To improve delivery of health services, particularly to the rural people. This is the rationale for AusAID's support to the sector, the guide to its engagement on policy and resource allocation issues and the key long term performance measure for the success of its support to the sector.

PROJECT STATUS:

There are effective health systems and processes and improved management capacity in place and the whole community in the rural areas are benefiting. In its operational status to date, support through funding the HSIP activities, co-funded the 2006 Demographic Health Survey, procurement of kits and supplying medical supplies to Health Centres which commenced in 2007. Supported the construction of 38 STI clinics, tendered and constructed through NDOH systems.

PROJECT COMPONENTS:

The project components include: 1) Support to the Government of Papua New Guinea to implement its National Health Plan and (2) Provide funds to enable GoPNG implement improvements to the Health Sector.

PROJECT LOCATION:

The project will be implemented in all centers in Papua New Guinea through National Department of Health.

PROJECT JUSTIFICATION:

This project is important in that it will support the Government of Papua New Guinea to implement its National Health Plan and to provide funds to enable GoPNG implement improvements to the Health Sector.

PROJECT CAPACITY:

The Department of Health has the capacity to effectively implement the program. The program is also supporting the CBSC activities and this is where capacity has expended.

PROJECT BENEFICIARIES:

The whole community in the rural areas will benefit from this project through effective health systems and processes.

PROJECT SUSTAINABILITY

The National Department of Health has both the capacity and technical expertise to effectively sustain and continue the program to effect provision of quality service for its people.

2499 HEALTH SECTOR RESOURCING FRAMEWORK

ESTIMATED TOTAL PROJECT COST 36,310.8 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services								
	Current Transfers								
	Sub-Total								
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
	Capital Transfers								
	Sub-Total		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
A	TOT DIRECT PROJECT COST		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
	Loan								
	Grant		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
C	TOTAL DIRECT FINANCING		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
	Technical Assistance								
	TOTAL FINANCING (C+D)		24,003.0	91,220.4	21,220.4	20,000.0	20,000.0	15,000.0	15,000.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

AusAID is fully funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022011208 HEALTH SECTOR RESOURCE FRAMEWORK

PIP NUMBER: 2686

PROJECT NAME: PURCHASE OF MEDICAL EQUIPMENT PROGRAM

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To address our hospitals chronic medical equipment problem by way of procuring new equipment, maintenance and repair of vital life saving equipment including cardiac defibrilaters, incubators, suction equipments, xray parts and emergency medical equipment.

PROJECT STATUS:

There is consistent progress in purchasing various equipments. The program has delivered essential medical equipments to major hospitals, rural hospitals and district health centres and provided basic life saving equipment. Also provided modern life saving medical equipment 'State of the Art Modern Technologies' to selected hospitals. Most hospitals, health centres and clinics have installed new equipments and maintenance and repair of vital life saving equipment have been carried out. 15% of Medical Supplies have been delivered while 45 % are in progress for installation and commissioning. 20% are on order and 20% are progressing for expediting.

PROJECT COMPONENTS:

The components include the purchasing and replacing of old and damaged vital medical equipments in hospitals throughout the country. These equipments include cardiac defibrillators, incubators, suction equipments, x-ray parts and other emergency medical equipments for various specialist units of the hospitals and clinics.

PROJECT LOCATION:

It is targeted for all hospitals throughout the country.

PROJECT JUSTIFICATION:

It is very important to improve on health services to save lives of our people by way of procuring new equipment, maintenance and repair vital life saving equipment in hospitals, rural health centres, throughout the country.

PROJECT CAPACITY:

All major hospitals, rural hospitals and district health centres have the capacity to effectively oversee, manage and sustain the program.

PROJECT BENEFICIARIES:

The major public hospitals, rural hospitals and district health centres and people throughout the country will benefit by way of purchasing and replacing old damaged vital life saving medical equipment. It is having a big impact on those affected and people's lives are saved in the areas where life saving equipment are in place.

PROJECT SUSTAINABILITY

Hospitals and rural health centres throughout the country are capable to sustain the program from internal revenue.

2686 PURCHASE OF MEDICAL EQUIPMENT PROGRAM

ESTIMATED TOTAL PROJECT COST 2,000.0 ESTIMATED DURATION OF THE PROJECT 1.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			12,000.0						
Current Transfers									
Sub-Total			12,000.0						
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation				20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
Capital Transfers									
Sub-Total				20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
A TOT DIRECT PROJECT COST			12,000.0	20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)			12,000.0	20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input			12,000.0	20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
b) Self Generating Revenue									
Loan									
Grant									
C TOTAL DIRECT FINANCING			12,000.0	20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
D Technical Assistance									
TOTAL FINANCING (C+D)			12,000.0	20,000.0	6,000.0	5,000.0	4,000.0	3,000.0	2,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

Nil.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022018206 PURCHASE OF MEDICAL EQUIPMENT PROGRAM

PIP NUMBER: 2757

PROJECT NAME: HEALTH PROGRAM RESPONSE TO HIV SECTOR

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To support PNG Health Sector's response to the HIV/AIDS epidemic through improving the capacity of primary health services to prevent and manage sexually transmitted infections as well as improving access to HIV/AIDS treatment.

PROJECT STATUS:

The HIV/AIDS epidemic is increasing in PNG and such initiative is addressing the spread of HIV/AIDS through increasing accessibility of STI prevention, care and treatment services to vulnerable groups in PNG.

PROJECT COMPONENTS:

Project components include: (1) HIV/AIDS surveillance; (2) Voluntary counselling and testing; (3) Condom procurement; (4) Prevention of parent to child transmission; (5). Anti-retroviral treatment; and (6). HIV/AIDS Awareness and Education.

PROJECT LOCATION:

The project will be located at the National Department of Health.

PROJECT JUSTIFICATION:

The HIV/AIDS epidemic is increasing in PNG therefore, such initiative will address the spread of HIV through increasing accessibility of STI prevention, care and treatment services to vulnerable groups in PNG.

PROJECT CAPACITY:

The National Department of Health has the capacity to execute the project with assistance from AusAID.

PROJECT BENEFICIARIES:

The people of Papua New Guinea will benefit from the project.

PROJECT SUSTAINABILITY

The National Department of Health with support of the National Government should be able to take on board the activities once project ends.

2757 HEALTH PROGRAM RESPONSE TO HIV SECTOR

ESTIMATED TOTAL PROJECT COST 20,433.3 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
A	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services		20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
	Current Transfers								
	Sub-Total		20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation								
	Capital Transfers								
	Sub-Total								
TOT DIRECT PROJECT COST			20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
B	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)			20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
FINANCING SOURCES									
C	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
D	Loan								
	Grant		20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
TOTAL DIRECT FINANCING			20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
D	Technical Assistance								
	TOTAL FINANCING (C+D)		20,433.3	86,064.6	18,064.6	18,000.0	18,000.0	16,000.0	16,000.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

The program is fully funded by AusAID.

POTENTIAL DONOR INVOLVEMENT

2009 Budget Votes for this PIP are :-

24022015217 HEALTH PROGRAM RESPONSE TO HIV SECTOR

PIP NUMBER: 2758

PROJECT NAME: SAVE THE CHILDREN STRATEGIC PARTNERSHIP

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

1) To enhance the capacity of civil society in PNG to effectively design, deliver and manage large, complex developments with a child rights focus. 2). To mitigate the negative impacts of HIV and AIDS among young people and PNG's most vulnerable groups. 3) To improve the health of vulnerable groups in selected regions of PNG.

PROJECT STATUS:

The project commenced in 2006 and will be phased out in 2009. The programme, based on the findings of its revised Country Strategy Plan (2006 - 2008), focuses on programme consolidation, strengthening of internal capacity, enhancing quality and according greater emphasis on child rights, protection and participation. A decision was also taken to concentrate on NGO capacity building and networking, HIV/AIDS and Health, which provided the basis for the Programme's themes as they capture the substantive work of Save the Children in PNG.

PROJECT COMPONENTS:

Components include: 1) Strengthening of existing partner abilities to design, implement and manage projects effectively and also support opportunities to mobilise NGOs for learning advocacy. 2) Protection of vulnerable children and young people from HIV and AIDS. 3) Focuses largely on strengthening the capacity of key partners to assume greater responsibility for service delivery.

PROJECT LOCATION:

The project will be executed by the National Department of Health, NGOs and Networking organisations including Eastern Highlands Family Voice, Haus Ruth, Evangelical Brotherhood Church, Mt. Sion Community-based Rehabilitation, Callan Services for the Disabled and Child Rights/Child Participation Programme.

PROJECT JUSTIFICATION:

The project helps with good health and development of a child mainly on physical, social and mental capacity. Project will also support women and children experiencing domestic violence and sexual assault, literacy and education programmes in remote communities, interventions for children with disabilities and promotion of child rights and leadership development in the country.

PROJECT CAPACITY:

Both the Health Department and Non-Government Organisations have the capacity to assist in the implementation in areas of training, program planning, leadership and coordination.

PROJECT BENEFICIARIES:

The primary beneficiaries will be children and mothers. Other beneficiaries will be the affected communities who will have access to clean water and sanitation as part of the component included in the project.

PROJECT SUSTAINABILITY

The National Department of Health has the capacity to sustain the program with support from its current existing programs.

2758 SAVE THE CHILDREN STRATEGIC PARTNERSHIP

ESTIMATED TOTAL PROJECT COST 5,009.8 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
Current Transfers									
Sub-Total			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
TOT DIRECT PROJECT COST			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
TOTAL DIRECT FINANCING			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
Technical Assistance									
TOTAL FINANCING (C+D)			5,009.8	17,454.3	4,454.3	4,000.0	4,000.0	3,000.0	2,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

NZAID is fully funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015218 SAVE THE CHILDREN STRATEGIC PARTNERSHIP

PIP NUMBER: 2759

PROJECT NAME: WHO TECHNICAL SUPPORT TO HEALTH SECTOR IN PNG

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To provide technical support in the country by supporting the capacity of the Health Sector to improve service delivery by way of effective planning and program support and advice.

PROJECT STATUS:

The program commenced in 2006 and expected to phase out in 2008 however, this program will continue to 2009. The program has been providing additional funding to the WHO PNG Office for the provision of technical assistance in health issues critical to PNG, including tuberculosis, human resources, pandemic and emergency preparedness and epidemiology.

PROJECT COMPONENTS:

The project components includes: 1). Provide skilled technical advice in key health areas to support NDoH strategic programs. 2). Support the capacity of the Health Sector to improve service delivery.

PROJECT LOCATION:

The program is located at the National Department of Health Headquarter, Port Moresby and will focus on providing technical advice and support to the health sector in Papua New Guinea.

PROJECT JUSTIFICATION:

The initiative of this project is to provide skilled technical advice in key health areas to support the NDoH strategic programs. The World Health Organisation (WHO) is the eminent international technical agency of the United Nations who is involved in assisting PNG in key health areas.

PROJECT CAPACITY:

The National Department of Health will oversee the implementation of the program but AusAID have the capacity to implement the program.

PROJECT BENEFICIARIES:

The National Department of Health and in particular the health sector will benefit from technical support into the program planning and implementation.

PROJECT SUSTAINABILITY

The National of Department Health has the capacity to sustain the program after the program ends.

2759 WHO TECHNICAL SUPPORT TO HEALTH SECTOR IN PNG

ESTIMATED TOTAL PROJECT COST 3,446.6 ESTIMATED DURATION OF THE PROJECT 6.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
Current Transfers									
Sub-Total			3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST		3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)			3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
C	TOTAL DIRECT FINANCING		3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
Technical Assistance									
D	TOTAL FINANCING (C+D)		3,446.6	12,047.0	3,047.0	3,000.0	3,000.0	2,000.0	1,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

AusAID is fully funding this project.

POTENTIAL DONOR INVOLVEMENT

2009 Budget Votes for this PIP are :-

24022015219 WHO TECHNICAL SUPPORT TO HEALTH SECTOR IN

PIP NUMBER: 2760

PROJECT NAME: TORRESS STRAIT TREATY ZONE HEALTH PLANNER

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

(1) To develop a better understanding of the conditions of Health Services provision on both sides of the Torres Strait Zone; (2) To improve communication between the clinics in the Torres Strait and the villages in Western Province; and (3) To identify opportunities for building and maintaining links between Queensland health and PNG Government.

PROJECT STATUS:

The project initially started implementation in 2005 and expected to phase out in 2007. However, due to delays in recruitment of both communication officers and provision of communications equipment, the pilot program has only been fully operational since April 2007. Some achievements include; (1). Data collection on disease prevalence and health service utilisation by PNG Nationals; (2). Improved communications has enabled follow up TB patients on return to PNG; and (3). Introduction of common TB protocols to reduce reliance on ATS on ATS Health Services for ongoing treatments.

PROJECT COMPONENTS:

Project components include: 1). Support to the improvement in health services 2). Develop a better understanding of the conditions of health service provision on both sides of border 3). Improve communication between the clinics in the Torres Strait; 4). Identify opportunities for building and maintaining links between Queensland Health and PNG health professionals.

PROJECT LOCATION:

The project is located in Western Province.

PROJECT JUSTIFICATION:

In 2003, a Joint Advisory Council (JAC) agreed to establish a Treaty Zone Health Issues Committee in recognition of increasing concern about health issues and the risk of communicable disease transmission into Australia.

PROJECT CAPACITY:

The PNG National Department of Health, the people of Western Province and the South Fly District have the capacity to maintain this project.

PROJECT BENEFICIARIES:

The beneficiaries will be the people of Papua New Guinea as well as the local people of Western Province.

PROJECT SUSTAINABILITY

The project will be sustained by the Department of Health, Western Provincial Administration and the South Fly District through its combined annual budget allocations.

2760 TORRESS STRAIT TREATY ZONE HEALTH PLANNER

ESTIMATED TOTAL PROJECT COST 1,107.8 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
Current Transfers									
Sub-Total			1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST		1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)			1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
C	TOTAL DIRECT FINANCING		1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
Technical Assistance									
D	TOTAL FINANCING (C+D)		1,107.8	3,579.4	979.4	800.0	700.0	600.0	500.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

AusAID is fully funding this project.

POTENTIAL DONOR INVOLVEMENT

2009Budget Votes for this PIP are :-

24022015220 TORRESS STRAIT TREATY ZONE HEALTH PLANNE

PIP NUMBER: 2761

PROJECT NAME: OXFAM NZ SACIR

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To promote peaceful development and reduce armed conflict in the Highlands of Papua New Guinea.

PROJECT STATUS:

The project commenced in 2007 and will phase out in 2010. Various partners like Kup women for Peace, Meri i Kirap Sapotim, and Peace Foundation Melanesia have all assisted to promote peace and reduced conflict in various locations in the Highlands Region.

PROJECT COMPONENTS:

The major components of the project include: 1) Capacity support to local Community Based Organisations (CBOs) and Non Government Organisations (NGOs) (2). Research, awareness raising and advocacy around small-arms issues (3). Improve livelihoods, with a focus on women and high risk youth (4). Learning exchange opportunities.

PROJECT JUSTIFICATION:

There is widespread recognition within PNG that the situations are sometimes beyond control and this project will promote peace, mediate conflict and improve livelihoods of the people.

PROJECT CAPACITY:

The Department of Health and New Zealand Aid have the capacity to implement the project.

PROJECT BENEFICIARIES:

The people from the five (5) Highlands Provinces will benefit from this project as well as the country as a whole.

PROJECT SUSTAINABILITY

Capacity building and training currently on line positions is important in sustaining the transfer of knowledge and skills under the project. The improved manpower capacity will be able to see the project through under the effective management and direction of the executing agency and the National Government.

2761 OXFAM NZ SACIR

ESTIMATED TOTAL PROJECT COST 1,089.1 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
Current Transfers									
Sub-Total			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A TOT DIRECT PROJECT COST			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
C TOTAL DIRECT FINANCING			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
D Technical Assistance									
TOTAL FINANCING (C+D)			1,089.1	3,969.0	1,069.0	1,000.0	800.0	600.0	500.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

The New Zealand Government through NZAID is fully funding this projec.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015221 OXFAM NZ SACIR

PIP NUMBER: 2762

PROJECT NAME: LEPROSY MISSION HEALTHY COMMUNITIES

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To control Leprosy and enhancing TB and Malaria control through Improved Community Health in Bougainville.

PROJECT STATUS:

The project duration is for three (3) years which commenced in 2005 and expected to phase out in 2008. The people throughout Bougainville who live in remote or isolated areas of the province now have access to services previously unavailable or inaccessible. The intense focus on community mobilization for health development have been directed towards six districts in the centre and south of Bougainville, namely Kieta, Wakunai, Sana, Siwai, Buin and Torokina districts. Three have been targeted in the first two years, and the remaining districts in the coming years.

PROJECT COMPONENTS:

The components include; 1) Equipment 2) Staff cost- BHCP staff 3) Administration cost 4) Training materials 5) Transport travel local 6) BHCP staff training/technical support 7) Facilitator training 8) DoH staff training 9) Community training 10) Awareness training 11) Supervision by facilitators 12) Monitoring & Evaluation

PROJECT LOCATION:

The project is located in Buka, North Solomons Province. The intense focus on community mobilisation for health development will be directed towards six (6) districts in the centre and south of Bougainville, namely Kieta, Wakunai, Bana, Siwai, Buin and Torokina. Three (3) were targeted in the first two years, and the remaining districts in the coming years.

PROJECT JUSTIFICATION:

The project addresses the need to improve healthy communities in Bougainville by controlling Leprosy and enhancing TB and Malaria control.

PROJECT BENEFICIARIES:

The people throughout Bougainville will be the beneficiaries including people who live in remote or isolated areas of the province will gain access to services previously unavailable or inaccessible. The intense focus on community mobilisation for health development will be directed towards six districts in the centre and south of Bougainville, namely Kieta, Wakunai, Bana, Siwai, Buin and Torokina districts. Three have been targeted in the first two years, and the remaining districts in the ensuing years.

PROJECT SUSTAINABILITY

To sustain, close co-operation needs to be maintained amongst all those in health sector work including NDOH ,NGOs and respective communities.

2762 LEPROSY MISSION HEALTHY COMMUNITIES

ESTIMATED TOTAL PROJECT COST 435.6 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services			435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
Current Transfers									
Sub-Total			435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST		435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)			435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant			435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
C	TOTAL DIRECT FINANCING		435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
Technical Assistance									
D	TOTAL FINANCING (C+D)		435.6	2,912.7	712.7	700.0	600.0	500.0	400.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

This project is fully funded by the New Zealand Government (NZAID).

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015222 LEPROSY MISSION HEALTHY COMMUNITIES

PIP NUMBER: 2867

PROJECT NAME: REPRODUCTIVE HEALTH PROJECT

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To develop a methodology and develop training programs for health centres and strengthen the reproductive health services to carry out effective services at all levels of the community in the country.

PROJECT STATUS:

The need for reproductive health and family planning programs in PNG is critical as both of the recent Demographic Health Survey and Base- line Survey (1996 - 1997) showed persistent high fertility rate, high maternal mortality, increasing morbidity from STDs and poor understanding of reproductive health issues.

PROJECT COMPONENTS:

The main components of the project include: (1). Training, family planning outreach and counselling; (2). management of health care facilities and services; (3). strengthening information dissemination.

PROJECT LOCATION:

The project falls under the overall directorship of the Preventive Health Services in Family Health Services under the National Department of Health as the executing agency.

PROJECT JUSTIFICATION:

The project is focusing at addressing the need for reproductive health and family planning programs in PNG and also to pay off outstanding contract obligations, especially in the supplies of STD and contraception drugs.

PROJECT BENEFICIARIES:

The project will directly benefit the (1); project provinces; (2). increase in the knowledge and skills of all health workers in the project provinces; (3). provision of better and quality reproductive health services; and (4). the methodology developed in the project will serve as a model in non-project areas in the country.

PROJECT SUSTAINABILITY

The work of the project is consistent with the current National Health Plan and the new 2001 - 2010 National Health Plan consistent with the objective and workplan of the Family Health Section NDOH. The Department of Health should be able to carry on when project ends.

2867 REPRODUCTIVE HEALTH PROJECT

ESTIMATED TOTAL PROJECT COST 0.0 ESTIMATED DURATION OF THE PROJECT Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
A	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services			7,541.5	1,541.5	2,000.0	2,000.0	1,000.0	1,000.0
	Current Transfers								
	Sub-Total			7,541.5	1,541.5	2,000.0	2,000.0	1,000.0	1,000.0
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation			7,247.2	1,247.2	2,000.0	2,000.0	1,000.0	1,000.0
	Capital Transfers								
	Sub-Total			7,247.2	1,247.2	2,000.0	2,000.0	1,000.0	1,000.0
TOT DIRECT PROJECT COST				14,788.7	2,788.7	4,000.0	4,000.0	2,000.0	2,000.0
B	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)				14,788.7	2,788.7	4,000.0	4,000.0	2,000.0	2,000.0
FINANCING SOURCES									
C	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
D	Loan								
	Grant			14,788.7	2,788.7	4,000.0	4,000.0	2,000.0	2,000.0
	TOTAL DIRECT FINANCING			14,788.7	2,788.7	4,000.0	4,000.0	2,000.0	2,000.0
D	Technical Assistance								
	TOTAL FINANCING (C+D)			14,788.7	2,788.7	4,000.0	4,000.0	2,000.0	2,000.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

UN and NZAID are funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022014211 REPRODUCTIVE HEALTH

PIP NUMBER: 2901

PROJECT NAME: SPECIAL MEDICAL EQUIPMENT SUPPLY PROGRAM (PACELF) SMESP

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

The objective is basically to focus on the control and elimination of lymphatic filiariasis, a disease commonly caused by Malaria and endemic in many parties of Papua New Guinea.

PROJECT STATUS:

The program commenced in 2007 and is focusing on the decline in number of elephantiasis in all region, fewer admissions and deaths as well as increased productivity and livelihood for all Papua New Guineans.

PROJECT COMPONENTS:

The components of the program include; (1). overseeing the implementation and coordination of the program (2). reporting and reviewing the number of elephantiasis cases in the regions or areas; and (3) research studies conducted

PROJECT LOCATION:

The project will be implemented in all centers in PNG through National Department of Health.

PROJECT JUSTIFICATION:

The project addresses the need to control the disease commonly caused by Malaria which is endemic in many parts of Papua New Guinea.

PROJECT CAPACITY:

The Department of Health as the executing agency has the capacity to implement and coordinate the program with t he support from the provincial and district health workers.

PROJECT BENEFICIARIES:

The general population in Papua New Guinea will be the main beneficiaries.

PROJECT SUSTAINABILITY

The National Department of Health with support of the scientific and technical officers will be able to effectively oversee the implementation of the program and ensure sustainability is effected through continous funding and support to the program. The provision of ensuring capacity building will be part of the program to maintain sustainability.

2901 SPECIAL MEDICAL EQUIPMENT SUPPLY PROGRAM (PACELF) SMESP

ESTIMATED TOTAL PROJECT COST 0.0 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services			3,902.4	902.4	900.0	800.0	700.0	600.0
	Current Transfers								
	Sub-Total			3,902.4	902.4	900.0	800.0	700.0	600.0
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation								
	Capital Transfers								
	Sub-Total								
A	TOT DIRECT PROJECT COST			3,902.4	902.4	900.0	800.0	700.0	600.0
	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)			3,902.4	902.4	900.0	800.0	700.0	600.0
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
	Loan								
	Grant			3,902.4	902.4	900.0	800.0	700.0	600.0
C	TOTAL DIRECT FINANCING			3,902.4	902.4	900.0	800.0	700.0	600.0
	Technical Assistance								
	TOTAL FINANCING (C+D)			3,902.4	902.4	900.0	800.0	700.0	600.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

JICA is involved in funding this program.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015224 SPECIAL MEDICAL EQUIPMENT SUPPLY PROGRAM

PIP NUMBER: 2908

PROJECT NAME: SPECIAL MEDICAL EQUIPMENT SUPPLY PROGRAMME (EPI)

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

The objective of this program is to assist the National Department of Health to effectively implement the National Immunization Program which is in line with the National Health Plan 2000 - 2012.

PROJECT STATUS:

The program commenced in 2007 and centers have been identified through the program activities to further expand the program to cover all the areas and is an ongoing program to implement the National Immunization in Papua New Guinea.

PROJECT COMPONENTS:

The components include; (1). well baby clinics; (2). safe motherhood and; (3) family planning

PROJECT LOCATION:

The program will be implemented by NDoH and the Provincial Division of Health throughout the country.

PROJECT JUSTIFICATION:

The program addresses the immunization problems and aims at reducing impacts on the health of general population especially on the growth and development of a young child.

PROJECT CAPACITY:

The National Department of Health has the capacity to implement the program with the support from the Provincial and National Health Sector Workforce.

PROJECT BENEFICIARIES:

The program will directly benefit the women and children under six (6) years old.

PROJECT SUSTAINABILITY

The National Department of Health with support of the scientific and technical officers will be able to effectively oversee the implementation of the program and ensure sustainability is effected through continous funding and support to the program.

2908 SPECIAL MEDICAL EQUIPMENT SUPPLY PROGRAMME (EPI)

ESTIMATED TOTAL PROJECT COST 105.1 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services				4,238.4	1,238.4	900.0	800.0	700.0	600.0
Current Transfers									
Sub-Total				4,238.4	1,238.4	900.0	800.0	700.0	600.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST			4,238.4	1,238.4	900.0	800.0	700.0	600.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)			4,238.4	1,238.4	900.0	800.0	700.0	600.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant				4,238.4	1,238.4	900.0	800.0	700.0	600.0
C	TOTAL DIRECT FINANCING			4,238.4	1,238.4	900.0	800.0	700.0	600.0
Technical Assistance									
D	TOTAL FINANCING (C+D)			4,238.4	1,238.4	900.0	800.0	700.0	600.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

JICA is fully funding this programme.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015225 SPECIAL MEDICAL EQUIPMENT PROGRAMME (EPI)

PIP NUMBER: 2910

PROJECT NAME: DISTRICT TOWN WATER SUPPLY

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To improve living conditions of rural population living in selected districts.

PROJECT LOCATION:

Maprik, Kainantu and Finschafen urban district towns.

PROJECT JUSTIFICATION:

Having easy access to clean and safe drinking water is a problem in districts and rural areas. People, especially women and girls have to go through a lot of trouble to make sure that water that is available for their families' consumption is clean and safe. Hence, this program will address this problem for the selected districts' populations.

PROJECT BENEFICIARIES:

Population of Maprik, Kainantu and Finchafen district towns will benefit from this project.

PROJECT SUSTAINABILITY

The Health Department, especially district health offices have the capacity to sustain this project as this project is cross-sectoral in nature and hence, other stakeholders will also be involved.

2910 DISTRICT TOWN WATER SUPPLY

ESTIMATED TOTAL PROJECT COST 2,800.0 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services				39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
Current Transfers									
Sub-Total				39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST			39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)				39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant				39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
C	TOTAL DIRECT FINANCING			39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
Technical Assistance									
D	TOTAL FINANCING (C+D)			39,515.9	9,515.9	9,000.0	8,000.0	7,000.0	6,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

European Union (EU) is funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022016204 DISTRICT TOWNS WATER SUPPLY

PIP NUMBER: 2912

PROJECT NAME: CHINESE MEDICAL TEAM

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To provide specialist medical services and impart invaluable skills to PNG doctors by a team of 10 Chinese Experts.

PROJECT STATUS:

The dispatchment of a medical team of 10 Chinese Experts to provide specialist medical services at the Port Moresby General Hospital of over a two year rotation from 2009 to 2010.

PROJECT COMPONENTS:

The project components include; (1). Provide short and long term training; (2). Provide medical supplies; (3). Learn specialist skills not available in Papua New Guinea.

PROJECT LOCATION:

The Chinese medical team will be based at Port Moresby General Hospital. However, opportunity exists to request the Chinese Government to extend the engagement of its Doctors to certain Provincial Hospitals.

PROJECT JUSTIFICATION:

In order to develop the friendly relationship and cooperation in the field of medical and health services between the two countries, the Government of the Independent State of Papua New Guinea and the Government of the People's Republic of China through friendly consultations have reached the agreement to send the 4th Chinese Medical Team of 10 Chinese Experts to provide specialist medical services to Papua New Guinea.

PROJECT CAPACITY:

The Chinese Medical, in close cooperation with the PNG Medical personnel have the capacity to diligently carry out medical work, exchange experience with and learn from each other through medical practice. The PNG doctors and health workers may then in turn provide the same services and skills within the country.

PROJECT BENEFICIARIES:

The PNG medical personnel will benefit in terms of medical work, exchange of experiences with and learn from each other through medical practice. Patients at the Port Moresby General Hospital will benefit very much from this service as well as people of Papua New Guinea.

PROJECT SUSTAINABILITY

Continuity of this service is possible as doctors become more specialized in their respective areas. The National Department of Health has the capacity to sustain the project activities.

2912 CHINESE MEDICAL TEAM

ESTIMATED TOTAL PROJECT COST 0.0 ESTIMATED DURATION OF THE PROJECT 4.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Budget	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services				8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
Current Transfers									
Sub-Total				8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST			8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)				8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant				8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
C	TOTAL DIRECT FINANCING			8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
Technical Assistance									
D	TOTAL FINANCING (C+D)			8,000.0	2,000.0	2,000.0	2,000.0	1,000.0	1,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

The People's Republic of China is fully funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022019207 CHINESE MEDICAL TEAM

PIP NUMBER: 2914

PROJECT NAME: HIV/AIDS MANAGEMENT

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVES:

To effectively and efficiently manage, coordinate, implement, monitor and evaluate the national response to HIV and AIDS focusing on reducing the rate of HIV and AIDS infection by 2012 and also provide services to those people living with HIV/AIDS.

PROJECT STATUS:

The project is targeted to review all data collection forms for verification, surveillance tools and training of health care workers in HIV surveillance, training community leadership and volunteers especially in the area of advocacy. Additional support will be provided through regular donor forums enabling strategic partnerships for Civil Society Organisations and Government in addressing resource mobilization plans.

PROJECT COMPONENTS:

The project component includes; 1). Training of officials at national, provincial, district and sectoral levels; (2). Coordination of donor forum on HIV/AIDS; (3). Comprehensive monitoring and evaluation system; (4). Capacity building for community leadership, volunteers and Provincial Aids Committee Secretariat.

PROJECT LOCATION:

The National Aids Council Secretariat will coordinate and facilitate the program through its network with its respective stakeholders and other implementing agencies throughout the country.

PROJECT JUSTIFICATION:

The project will further strengthen the NACS leadership and coordination through a comprehensive national monitoring and evaluation system managed by NACS to address the National Response. This will be possible through the rollout of the Coordinated Response Information System (CRIS) as the national data base system with linkages to the provinces and all sectors across the board.

PROJECT CAPACITY:

NACS has the capacity to implement the program through its network with the CBOs, NGOs, Private and Government agencies and other respective organisations.

PROJECT BENEFICIARIES:

The Provincial Aids Committee Secretariat and Provincial Surveillance Officers of the Provincial Health Office as well as the respective stakeholders and implementing agencies involved in the national response will benefit in terms of computers and accessories, other equipment, technical assistance on training and support on the HIV data information system and the country as a whole.

2914 HIV/AIDS MANAGEMENT

ESTIMATED TOTAL PROJECT COST 0.0 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services				6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
Current Transfers									
Sub-Total				6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A	TOT DIRECT PROJECT COST			6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B	TOT TECHNICAL ASSISTANCE								
TOTAL PROJECT COST (A+B)				6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant				6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
C	TOTAL DIRECT FINANCING			6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
Technical Assistance									
D	TOTAL FINANCING (C+D)			6,598.6	1,898.6	2,000.0	1,000.0	900.0	800.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

UN is involved in funding this project.

POTENTIAL DONOR INVOLVEMENT

2009 Budget Votes for this PIP are :-

24022015226 HIV/AIDS MANAGEMENT

PIP NUMBER: 2918

PROJECT NAME: NZAID HIV/AIDS INITIATIVE

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To assist with effective and efficient delivery of New Zealand Government HIV/AIDS support to PNG Health Sector's response to the HIV/AIDS epidemic through strengthening both the national level leadership and governance by contributing to improved service delivery and sectoral outcomes at the province and district levels.

PROJECT STATUS:

The health and HIV/AIDS will continue to be a major focus of NZAID support under the new strategy. PNG has a health and HIV/AIDS policy, and financing and delivery framework that are relatively well financed by the Government and Development Partners. However, the effectiveness of service delivery is constrained by leadership and capacity challenges at all levels.

PROJECT COMPONENTS:

The project components include; (1). Capacity building at all levels; (2). Strengthen national level leadership and governance; (3). Improvement in achievement of strategies, service delivery or better health outcomes.

PROJECT LOCATION:

The project will be located at the National Department of Health and will be coordinated for effective service delivery or better health outcomes at the province and district levels.

PROJECT JUSTIFICATION:

Overall, there has been little or no improvement in achievement of strategies, service delivery or better health outcomes therefore, New Zealand Government's support to the sector, with a focus on improving health outcomes is very significant.

PROJECT CAPACITY:

The National Department of Health has the capacity to execute the project with assistance from NZAID.

PROJECT SUSTAINABILITY

The National Department of Health with support of the National Government should be able to take on board the activities once project ends.

2918 NZAID HIV/AIDS INITIATIVE

ESTIMATED TOTAL PROJECT COST 4,000.0 ESTIMATED DURATION OF THE PROJECT 2.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
DIRECT PROJECT COST									
Current Expenditure									
Personal Emoluments									
Goods and Other Services				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
Current Transfers									
Sub-Total				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
Capital Expenditure									
Acquisition of Existing Assets									
Capital Formation									
Capital Transfers									
Sub-Total									
A TOT DIRECT PROJECT COST				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
Technical Assistance									
Project Preparation									
Advisory									
Training									
Equipment									
B TOT TECHNICAL ASSISTANCE									
TOTAL PROJECT COST (A+B)				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
FINANCING SOURCES									
IDENTIFIED FINANCING									
Direct Project Financing:									
Government Contributions:									
a) Government Input									
b) Self Generating Revenue									
Loan									
Grant				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
C TOTAL DIRECT FINANCING				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
D Technical Assistance									
TOTAL FINANCING (C+D)				7,281.7	1,781.7	2,000.0	1,500.0	1,000.0	1,000.0
FINANCING SOUGHT									
Direct Project Cost (A-C)									
Technical Assistance (B-D)									
TOTAL FINANCING SOUGHT									

CURRENT DONOR INVOLVEMENT

NZAID is funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022015227 NZAID HIV/AIDS INITIATIVE

PIP NUMBER: 2928

PROJECT NAME: SEXUAL HEALTH PROJECT

EXECUTING AGENCY: Department of Health

PROJECT OBJECTIVIES:

To contribute to the improvement of the sexual health status of the people in PNG and to contribute to preventing and controlling the further transmission of HIV and STIS in support to the National Aids Council Secretariat.

PROJECT STATUS:

The Sexual Health Project began its implementation in May 2002 with the Resident Technical Advisor from the Euro Health Group was contracted to provide technical assistance to the project. The major activities involved the completion of needs assessments in 20 provinces, regional and national workshops, the scaled-up interventions, the monitoring of pilots and interventions, evaluation of pilots, capacity building, ongoing peer education training plus refresher courses and local technical assistance for the preparation of workshops and information dissemination documentation. Project phased out in 2006 however, continuing to 2009 to wind up everything.

PROJECT COMPONENTS:

The project components include; (1). Support and build capacity of NACS; (2). Support Policy Development (Strategic Plans, Workplace Policy, Peer Education); (3). Support Formulation of National Guidelines for Implementation of Peer Education and Targeted Interventions for Behaviour Change

PROJECT LOCATION:

The project was located at National Aids Council Secretariat.

PROJECT JUSTIFICATION:

To address the country's most critical health and socio-economic problem a National Strategic Plan on HIV/AIDS (2004-2008) is currently under implementation. There is an urgent need for total support to National Aids Council by all sectors, agencies, NGOs and international donors to assist in the fight against the deadly disease.

PROJECT BENEFICIARIES:

NACS and Provinces are the recipient and beneficiaries to the project however, in the long term, the people of Papua New Guinea will be benefiting from the outputs of the project such as reduction in the loss of loved ones and improved health.

PROJECT SUSTAINABILITY

The National Aids Council with support of the National Government should be able to take on board the activities.

2928 SEXUAL HEALTH PROJECT

ESTIMATED TOTAL PROJECT COST 1,227.7 ESTIMATED DURATION OF THE PROJECT 5.0 Years

EXPENDITURE PROJECTION AND FINANCING REQUIREMENTS (K'000)

PROJECT COST		2007 Actual	2008 Bugdet	5 Year Total	2009	2010	2011	2012	2013
	DIRECT PROJECT COST								
	Current Expenditure								
	Personal Emoluments								
	Goods and Other Services								
	Current Transfers								
	Sub-Total								
	Capital Expenditure								
	Acquisition of Existing Assets								
	Capital Formation			895.4	245.4	200.0	200.0	150.0	100.0
	Capital Transfers								
	Sub-Total			895.4	245.4	200.0	200.0	150.0	100.0
A	TOT DIRECT PROJECT COST			895.4	245.4	200.0	200.0	150.0	100.0
	Technical Assistance								
	Project Preparation								
	Advisory								
	Training								
	Equipment								
B	TOT TECHNICAL ASSISTANCE								
	TOTAL PROJECT COST (A+B)			895.4	245.4	200.0	200.0	150.0	100.0
FINANCING SOURCES									
	IDENTIFIED FINANCING								
	Direct Project Financing:								
	Government Contributions:								
	a) Government Input								
	b) Self Generating Revenue								
	Loan								
	Grant			895.4	245.4	200.0	200.0	150.0	100.0
C	TOTAL DIRECT FINANCING			895.4	245.4	200.0	200.0	150.0	100.0
D	Technical Assistance								
	TOTAL FINANCING (C+D)			895.4	245.4	200.0	200.0	150.0	100.0
FINANCING SOUGHT									
	Direct Project Cost (A-C)								
	Technical Assistance (B-D)								
	TOTAL FINANCING SOUGHT								

CURRENT DONOR INVOLVEMENT

European Union is fully funding this project.

POTENTIAL DONOR INVOLVEMENT**2009 Budget Votes for this PIP are :-**

24022014205 SEXUAL HEALTH PROJECT